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10/038,509	01/03/2002	Terry J. Smith	066742-0015	5468

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MCDERMOTT, WILL & EMERY LLP  
600 13th Street, NW  
Washington, DC 20005-3096

EXAMINER
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ROONEY, NORA MAUREEN

ART UNIT	PAPER NUMBER
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1644

NOTIFICATION DATE	DELIVERY MODE
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10/04/2010

ELECTRONIC

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

mweipdocket@mwe.com  
SIP\_Docket@mwe.com



### **DETAILED ACTION**

1. Applicant's response filed on 07/29/2010 is acknowledged.
2. Claims 1, 3 and 6-7 are currently pending and under consideration as they read on a method of detecting Graves' disease in a patient comprising (a) obtaining an orbital or skin sample comprising fibroblasts from the patient, (b) contacting said fibroblasts with disease specific IgG from the same patient, and (c) detecting in said an orbital or skin sample binding of disease specific IgG to the IGF-1 receptor (IGF-1 R) relative to a control wherein said binding of disease specific IgG to the IGF-1 receptor (IGF-1 R) activates fibroblasts, wherein an increased presence of IgG-activated fibroblasts compared to the control indicates Graves' disease, and wherein fibroblast activation is determined by measuring the level of IL-16 expressed by said IgG-activated fibroblasts, RANTES expressed by said IgG-activated fibroblasts or by measuring T cell migration towards said fibroblasts in said orbital or skin sample.
3. In view of Applicant's amendment filed on 07/29/2010, only the following rejection is maintained.

### ***Double Patenting***

4. The nonstatutory double patenting rejection is based on a judicially created doctrine grounded in public policy (a policy reflected in the statute) so as to prevent the unjustified or improper timewise extension of the "right to exclude" granted by a patent and to prevent possible harassment by multiple assignees. A nonstatutory obviousness-type double patenting rejection is appropriate where the conflicting claims are not identical, but at least one examined application claim is not patentably distinct from the reference claim(s) because the examined application claim is either anticipated by, or would have been obvious over, the reference claim(s). See, e.g., *In re Berg*, 140 F.3d 1428, 46 USPQ2d 1226 (Fed. Cir. 1998); *In re Goodman*, 11 F.3d 1046, 29 USPQ2d 2010 (Fed. Cir. 1993); *In re Longi*, 759 F.2d 887, 225 USPQ 645 (Fed. Cir. 1985); *In re Van Ornum*, 686 F.2d 937, 214 USPQ 761 (CCPA 1982); *In re*

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*Vogel*, 422 F.2d 438, 164 USPQ 619 (CCPA 1970); and *In re Thorington*, 418 F.2d 528, 163 USPQ 644 (CCPA 1969).

A timely filed terminal disclaimer in compliance with 37 CFR 1.321(c) or 1.321(d) may be used to overcome an actual or provisional rejection based on a nonstatutory double patenting ground provided the conflicting application or patent either is shown to be commonly owned with this application, or claims an invention made as a result of activities undertaken within the scope of a joint research agreement.

Effective January 1, 1994, a registered attorney or agent of record may sign a terminal disclaimer. A terminal disclaimer signed by the assignee must fully comply with 37 CFR 3.73(b).

5. Claims 1, 3 and 6-7 stand rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 1-4 of U.S. Patent No. 6,936,426 (PTO-892 mailed on 04/29/2010; Reference A) for the same reasons as set forth in the Office Action mailed on 04/29/2010.

Although the conflicting claims are not identical, they are not patentably distinct from each other.

Instant claims 1, 3 and 6-7 are drawn to : a method of detecting Graves' disease in a patient comprising (a) obtaining an orbital or skin sample comprising fibroblasts from the patient, (b) contacting said fibroblasts with disease specific IgG from the same patient, and (c) detecting in said an orbital or skin sample binding of disease specific IgG to the IGF-1 receptor

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(IGF-1 R) relative to a control wherein said binding of disease specific IgG to the IGF-1 receptor (IGF-1 R) activates fibroblasts, wherein an increased presence of IgG-activated fibroblasts compared to the control indicates Graves' disease, and wherein fibroblast activation is determined by measuring the level of IL-16 expressed by said IgG-activated fibroblasts, RANTES expressed by said IgG-activated fibroblasts or by measuring T cell migration towards said fibroblasts in said orbital or skin sample of claim 1; wherein an elevated level of the marker compared to the control indicates presence of said IgG-activated fibroblasts of claim 3; wherein the detecting is accomplished by exposing T-cells to said orbital or skin sample comprising said fibroblasts and measuring T-cell migration toward said fibroblasts, wherein an increase in the migration of said fibroblasts relative to the control indicates presence of said IgG-activated fibroblasts of claim 6; and wherein the patient is human of claim 7.

Claims 1-4 of U. S. Patent 6,936,426 are directed to: a method of detecting thyroid-associated ophthalmopathy in a patient comprising: obtaining a biological sample from the patient, isolating IgG from the patient sample, exposing the IgG to orbital fibroblasts from patients with thyroid-associated ophthalmopathy, measuring the level of IL-16 or RANTES produced by the orbital fibroblasts, wherein an elevated level of IL-16 or RANTES, as compared to normal control indicates the presence or severity of thyroid-associated ophthalmopathy in the patient of claim 1; wherein the level of IL-16 or RANTES is measured by an Enzyme-Linked Immunosorbent Assay (ELISA) of claim 2; wherein the patient is human of claim 3; and wherein the biological sample is selected from the group consisting of: blood, synovial fluid, ascites, and tissue of claim 4. It is noted that thyroid-associated ophthalmopathy is present in Graves Disease

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patients. Therefore, the same method is being performed in the same patient population for the same result.

Applicant's argument filed on 07/29/2010 has been fully considered, but is not found persuasive.

Applicant argues:

"Claim 1 has been amended to clarify that the claimed methods require detection of binding of the disease-specific antibodies to the IGF-1R autoantigen. Patent No. 6,936,426 neither teaches nor suggests even the identity of the autoantigen responsible for the autoimmune response in Graves Disease. Removal of the rejection of claims 1, 3, 6-7 and 9-11 on the ground of non-statutory obviousness-type double patenting over claims 1-4 of U.S. Patent No. 6,936,426 is respectfully requested."

It is the Examiner's position that the active steps of instant claims 1, 3 and 6-7 are the same as claims 1-4 of the 6,936,426 patent. In the method of claims 1-4 of 6,936,426, Graves Disease specific IgG has inherently bound the IGF-I receptor and activated the fibroblasts. There is no difference between the active method steps or the patient populations. Therefore, the results are inherent. Applicant is attempting to rely on a previously unappreciated property of the activation step of the method in order to make the method patentably distinct. IGF-1 receptor specificity of Graves Disease Specific IgG is an intrinsic property of the Graves Disease Specific IgG. See *In re Cruciferous Sprout Litigation*, 301 F.3d 1343, 64 USPQ2d 1202 (Fed. Cir. 2002). There are no active steps that make the instant method of claims 1, 3 and 6-7 any different than that of claims 1-4 of Patent 6,936,426. The method performed with or without the knowledge of IGF-1 receptor specificity of Graves Disease Specific IgG still results in the measurement of fibroblast activation by measuring IL-16, RANTES or T-cell migration and a detection of Graves Disease.

6. No claim is allowed.

7. **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

8. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Nora M. Rooney whose telephone number is (571) 272-9937. The examiner can normally be reached Monday through Friday from 8:30 am to 5:00 pm. A message may be left on the examiner's voice mail service. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Ram Shukla can be reached on (571) 272-0735. The fax number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

September 29, 2010

Nora M. Rooney  
Patent Examiner

Application/Control Number: 10/038,509

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Technology Center 1600

/Nora M Rooney/

Primary Examiner, Art Unit 1644